



Application for Rates Refund

Completed form to be forwarded to the Finance Department

To: Financial Services Department,
Waitaki District Council
Oamaru

Dear Sir/Madam,

I _____ do hereby
apply for a refund or transfer of \$ _____ being part of the rates credit currently held on

Valuation Number / Assessment Number

At Property Address: _____

Repayment Refund Details: *(Please Select One)*

Direct Credit payment to be made to

Account No.: - -

Account Name: _____

if possible please provide a deposit slip / bank record showing account no.

OR

Please transfer the sum of \$ _____ to the

Valuation Number / Assessment Number

Remittance advice to be sent to:

Email: _____

or Postal Address: _____

Please note: if a property is owned by two or more people each, ratepayer is required to sign the refund application form.

Signature of Ratepayer: _____

Date _____

Signature of Ratepayer: _____

Date _____